

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request: _____		2 Serial/Patent # <u>08/231565</u>		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input checked="" type="checkbox"/>	Filing			\$ <u>2456.00</u> ^{22.00}
<input type="checkbox"/>	Amendment			\$
<input type="checkbox"/>	Extension of Time			\$
<input type="checkbox"/>	Notice of Appeal/Appeal			\$
<input type="checkbox"/>	Petition			\$
<input type="checkbox"/>	Issue			\$
<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/>	Maintenance			\$
<input type="checkbox"/>	Assignment			\$
<input type="checkbox"/>	Other <u>8/19/94</u>			\$
<div style="border: 1px solid black; padding: 5px; text-align: center;"> CANCELLED <i>Since cancelled there were no fees in the case for this fee.</i> </div>			7 TOTAL AMOUNT OF REFUND	
			\$ <u>2456.00</u> ^{22.00}	
10 REASON:		8 TO BE REFUNDED BY:		
<input checked="" type="checkbox"/>	Overpayment <i>Case cancelled</i>	Treasury Check		
<input type="checkbox"/>	Duplicate Payment <i>Please submit</i>	Credit Deposit A/C #:		
<input type="checkbox"/>	No Fee Due (Explanation) <i>CANCELLED</i>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1 3 -- 4 5 0 0 </div>		
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: _____		TITLE: <u>Leg Em</u>		
SIGNATURE: <u>K Dye</u>		PHONE: <u>308-1202</u>		
OFFICE: <u>OWAR</u>				

THIS SPACE RESERVED FOR FINANCE USE ONLY:				
APPROVED: <u>Audrey Juyman</u>		DATE: <u>8/19/94</u>		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B